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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/832,510	04/10/2001	Larry M. Rose	2307O087910	2456	
20350	7590 06/28/2002				
TOWNSEND AND TOWNSEND AND CREW, LLP			EXAMINER		
EIGHTH FLO	* - ·		HUFF, SHEELA JITENDRA		
SAN FRANC	ISCO, CA 94111-3834		ART UNIT	PAPER NUMBER	
			1642		
			DATE MAILED: 06/28/2002	ı.	

Please find below and/or attached an Office communication concerning this application or proceeding.



Application No.	Applicant(s)
09/832,510	ROSE ET AL.
Examiner	Art Unit
Sheela J Huff	1642

Interview Summary	09/832,510	ROSE ET AL.	ROSE ET AL.	
interview Summary	Examiner	Art Unit		
	Sheela J Huff	1642		
All participants (applicant, applicant's representative	e, PTO personnel):	·		
(1) <u>Sheela J Huff</u> .	(3)			
(2) <u>Larry Hyman</u> .	(4)			
Date of Interview: 27 June 2002.				
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applic		sentative]		
Exhibit shown or demonstration conducted: d) \( \bigcup \) If Yes, brief description:	∕es e)⊠ No.			
Claim(s) discussed: <u>cancelled claims</u> .				
Identification of prior art discussed: none.				
Agreement with respect to the claims f) was rea	ached. g)⊠ was not reach	ed. h)□ N/A.		
reached, or any other comments: There is no response restriction requirement has been recd. Atty clarified cancelled claims were inadvertantly amended in page (A fuller description, if necessary, and a copy of the allowable, if available, must be attached. Also, whe allowable is available, a summary thereof must be a	that claims 1-6 and 25-34 are per no. 5, filed 6/3/02.  amendments which the example no copy of the amendmen	e to remain cancelled a	nd the  der the claims	
<ul> <li>i) It is not necessary for applicant to provinchecked).</li> </ul>	de a separate record of the s	ubstance of the intervie	w(if box is	
Unless the paragraph above has been checked, TH MUST INCLUDE THE SUBSTANCE OF THE INTERACTION has already been filed, APPLICANT IS GIVEN STATEMENT OF THE SUBSTANCE OF THE INTERVERSE side or on attached sheet.	RVIEW. (See MPEP Section NONE MONTH FROM THIS	713.04). If a reply to the INTERVIEW DATE TO	ne last Office FILE A	
		SHEELA HUFF PRIMARY EXAMINER	Jely	
Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.	 Examine	er's signature, if require		